FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ONGAN													
	(See inst	ructions)	Office us	se only										
NAME OF COMMITTEE (in	(Check if nam is changed)	ne Example: If typying, type over the lines	12FE4M5											
PROGRESSIV	VE VOTE AKA PROGRESSIVE	DEMOCRATS OF AMERICA												
	<u> </u>													
ADDRESS (number and	d street) 4045 E. Palm La	ne												
(Check if addissingly is changed)														
is changed)	Phoenix		AZ 18	5008 -										
COMMITTEE'S E-MA	AIL ADDRESS	CITY▲	STATE▲	ZIP CODE 📥										
angie@pdam	erica.org													
COMMITTEE'S WEE	B PAGE ADDRESS (URL)													
www.pdame	rica.org													
COMMITTEE'S FAX	NUMBER													
با لبنا	لــــا لـــ													
2. DATE 0 .	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y													
3. FEC IDENTIFIC	ATION NUMBER	C C00402800												
4. IS THIS STATE	MENT X NEW (N)	AMENDED (A)												
I certify that I have exam	nined this Statement and to the best of m	ny knowledge and belief it is true, correc	et and complete											
Type or Print Name o	f Treasurer Angie Bobst	t-Romero												
Signature of Treasure	er Electronically Filed by Angle	Bobst-Romero	Date 04 / D	17 Y 2007										
NOTE: Submission of f	alse, erroneous, or incomplete information	on may subject the person signing this RMATION SHOULD BE REPORTE	•	J.S.C. S437g.										
Office Use Only		For further informati Federal Election Com Toll Free 800-424-95 Local 202-694-1100	mission	EC FORM 1 evised 02/2003)										

	FECForm 1 (Revised 02/2003)	Page 2
5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the cainformation below.)	andidate
	Name of Candidate	
	Candidate Party Affiliation Office Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		emocratic, oublican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	nd or party
6.	Name of Any Connected Organization or Affiliated Committee	
l		.
	Mailing Address	
	CITY▲ STATE▲ 2	ZIP CODE A
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	on
	Membership Organization Trade Association Cooperative	

Page 3

Write or Type Committee Name

PROGRESSIVE VOTE AK	A PROGRESSIVE DEMOCRATS OF	AMERICA
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Custodian of Records: le possession of Committe	dentify by name, address, (phone number books and records.	per optional), and position of	the person in										
Full Name Angle	Bobst-Romero												
Mailing Address	2315 N. 39th Pl.	2315 N. 39th Pl.											
	Phoenix	AZ	85008										
Title or Position ♥	CITY A	STATE▲	ZIP CODE A										
Treasure	er	Telephone number 602	326 4788 										
name and address of ar	e and address (phone number option by designated agent (e.g., assistant trea e Bobst-Romero	al) of the treasurer of the comr surer).	mittee; and the										
of Treasurer Angle Mailing Address	2315 N. 39th Pl.												
	Phoenix		85008 _										
Title or Position ♥	CITY A	STATE▲	ZIP CODE A										
Treasure	or	Telephone number 602	326 4788										
Full Name of Designated Agent													
Mailing Address													
	CITY A	STATE A	ZIP CODE A										
Title or Position ♥													
Title or Position ♥													

	FEC Form 1 (Revised 02/2003)															Page 4																						
9.	Banks or Other I safety deposit box							ll ba	ınk	s or	otl	her	de	pos	sito	ries	in	wh	ich	the	COI	mm	itte	e de	epo	sits	fur	nds	, hc	lds	ac	cou	ınts	, rei	nts			
	Name of Bank, De	eposi	tory,	etc.																																		
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	Mailing Address				L		I	L	l	I	L	1	ı		1											1	ı	1	1		丄						ı	
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CITY △													ST	ΑT	E∠	4				Z	iP (COE	Œ	△														